



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

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LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST

NAME (Last)	(First)	(Middle)	TELEPHONE
KEKAUOHA	DONNA	L.	(808) 841-5877
MAILING ADDRESS (Street)			FAX
1617 PALAMA ST.			(808) 847-7829
(City)	(State)	(Zip Code)	
HONOLULU	HI	96817	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

PART II ORGANIZATION

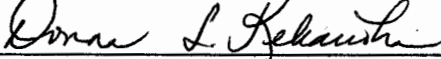
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
LABORERS' INTERNATIONAL UNION OF NORTH AMERICA, LOCAL 368, AFL-CIO	(808) 841-5877	
MAILING ADDRESS (Street)	FAX	
1617 PALAMA ST.	(808) 847-7829	
(City)	(State)	(Zip Code)
HONOLULU	HI	96817
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
DONNA L. KEKAUOHA		(808) 841-5877
MAILING ADDRESS (Street)		FAX
1617 PALAMA ST.		(808) 847-7829
(City)	(State)	(Zip Code)
HONOLULU	HI	96817

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	<input checked="" type="checkbox"/> Education	Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input checked="" type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	<input checked="" type="checkbox"/> Housing	Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

1/18/05

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
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BENJAMIN SAGUIBO

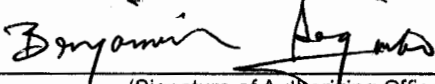
BUSINESS MANAGER/SECRETARY-TREASURER

NAME OF ORGANIZATION (if applicable)	TELEPHONE
LABORERS' INTERNATIONAL UNION OF NORTH AMERICA, LOCAL 368 AFL-CIO	(808) 841-5877

MAILING ADDRESS (Street)	FAX
1617 PALAMA ST.	(808) 847-7829

(City)	(State)	(Zip Code)
HONOLULU	HI	96817

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

January 25, 2005

(Date)